ND RYAN WHITE PROGRAM PART B NORTH DAKOTA DEPARTMENT OF HEALTH

OBTAINING HEALTH COVERAGE

Affordable Care Act mandates most individuals to have health coverage or pay a penalty. Case managers are expected to strongly pursue all available options for obtaining coverage and secure non-Ryan White HIV/AIDS Program funds whenever possible for services provided to individual clients (HRSA PCN #13-04).

Granted by statute, Ryan White Part B funds may not be used for items or services where payment has been made, or can be expected to be made by another payment source, to pay Medicaid recipient liability (i.e. spend-down), or penalty due to not having health coverage. Program funds may still be used to cover co-pays, deductibles, and services not covered under the client's health coverage.

The North Dakota Ryan White Part B Program health coverage policy is as follows:

- 1. Clients eligible for Medicaid, Medicare, or affordable employer coverage must enroll in that coverage.
 - a. Clients with income below 200 percent of the Federal Poverty Level must apply for Medicaid and provide proof of acceptance or denial.
 - b. Clients eligible for Medicare must sign up for Medicare Part D and may receive premium assistance through ADAP.
 - c. Clients eligible for affordable private insurance through their employer must apply for it and may receive premium assistance through ADAP.
- 2. Clients who do not qualify for public or affordable private employer insurance are required to apply for the Qualified Health Plan through the Marketplace, and may receive premium assistance through ADAP.
- 3. Clients that do not qualify for public, private, or Qualified Health Plans through the Marketplace, will be dealt with on an individual basis.
- 4. Clients that refuse to sign up for health coverage must be counseled on consequences of remaining uninsured, and must sign the *Request to Decline Health Coverage* form.
- 5. Uninsured clients that fail to apply for eligible coverage and provide a proof of acceptance or denial, or sign the *Request to Decline Health Coverage* form will be removed from the program for noncompliance.
- 6. For auditing purposes, the case manager maintains documentation of all actions in the client's file. This documentation will be made available upon request to the RW Coordinator.

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